

MAR 02 2005

PTO/SB/22 (12-04)  
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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**  
**FY 2005**  
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Application Number 10/033,243 Filed December 27, 2001

For IMMUNOMODULATORY POLYNUCLEOTIDES AND METHODS OF USING THE SAME

Art Unit 1845 Examiner P. C. Jffy

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>        </u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>        </u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ <u>        </u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ <u>        </u>
<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ <u>1,080.00</u>

☒ Applicant claims small entity status. See 37 CFR 1.27.  
☐ A check in the amount of the fee is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.  
☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to, the Deposit Account Number 03-1952. I have enclosed a duplicate copy of this check. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

I am the ☐ applicant/inventor.  
☐ assignee of record of the entire interest. See 37 CFR 3.71.  
                     Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
☒ attorney or agent of record. Registration Number 46,332  
☐ attorney or agent under 37 CFR 1.34.  
                     Registration number if acting under 37 CFR 1.34                     

Karen R. Zachow March 2, 2005  
                     Signature Date  
Karen R. Zachow, Ph.D. (858) 720-519  
                     Typed or printed name Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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